

# Environmental Protection Agency

2200 Churchill Road, Springfield, Illinois 62706

November 3, 1982

Mr. Irv Kraut  
Xpol-Tec, Inc.  
P. O. Box 446  
Prospect Heights, Illinois 60070-0446

Mr. Kraut:

I have studied your recent request to this Agency regarding the destruction of explosive or reactive materials and feel your proposal is a sound one. Dealing with nonlandfillable substances is a perplexing issue and I'm pleased to know that there are commercial alternative being proposed.

Although your plan involves dealing with hazardous wastes and as you know this Agency has an entire division dedicated to this task, your proposal really doesn't fit into our standard permit or variance programs. However since I perceive this to be such a valuable service, this Agency shall approve a program whereby your company can proceed with the detonation or reaction of the chemicals that you have identified in your introduction letter. Our approval also is valid only at the facility/site that you have already specified.

Since we don't have any established format for your program I have asked our Emergency Response Unit along with the divisions of Air and Land Pollution Control to outline guidelines for a case-by-case verification program. These contingencies are listed below:

- 1) Prior to detonation or reaction of the materials a telephone call from your company to this Agency's Duty Officer (DO) at 217/782-3637 (24 hour) must be made identifying the name(s) of the chemical(s), volumes and expected time and date of response. When time permits or if the volume makes it difficult to deal with over the telephone a letter would suffice.
- 2) Our Duty Officer shall assess each request considering such things as: meteorological conditions via the National Weather Service, combustion or reaction by products, potential for harmful residues and other safety conditions. At this time the DO can give verbal authority to proceed if he/she feels it is appropriate. In the event of a perceived problem the DO has the authority to cancel the response.

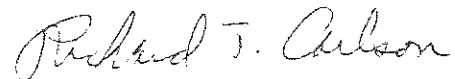
November 3, 1982

- 3) After each response and for record keeping purposes I shall require a written report (letter) be sent to this Agency's Emergency Response Unit documenting the incident. This documentation would include the same information that was initially reported to the DO as well as an explanation of any unusual problems that occurred during the disposal.

I realize that some situations are going to fall into the emergency class and we shall be quite liberal on granting authorization. Whenever we do have time to plan, our DO shall consider the questions of dispersion conditions, toxic residues and other safety factors very carefully prior to granting authorization.

Since this is an experimental program I would like to follow this plan for one (1) year. After that time we can discuss other options and develop a more formalized procedure, if necessary. If you have any additional questions, please feel free to contact anyone of my staff in the Emergency Response Unit at 217/782-4129.

Sincerely,



Richard J. Carlson  
Director

RJC:JR:jks

cc: John Renkes  
Dan Goodwin  
Sy Levine  
Rama Chaturvedi  
Ken Bechely  
Bob Sharp  
Roger Kanerva

RECEIVED  
NOV 12 1982  
WASTE MANAGEMENT  
BRANCH

SHW

MAY 1 1 1983

Frank D. Grossman, President  
Vulcan Materials Company  
P. O. Box 6  
500 W. Plainfield Road  
Countryside, Illinois 60525

Re: Hazardous Waste Management  
Facility Permit Application

Dear Mr. Grossman:

Thank you for your Part A permit application of April 19, 1983, which indicated that your company would like to commence open burning of hazardous waste.

The only hazardous waste that U.S. EPA allows to be open burned are waste explosives which are defined, in 40 CFR 265.382, as waste which has the potential to detonate and bulk military propellants which cannot safely be disposed of through other modes of treatment. Detonation is defined as an explosion in which chemical transformation passes through the material faster than the speed of sound. Wastes which deflagrate, but do not detonate, may not be open burned. Deflagration is defined as the very rapid auto combustion of particles of explosive as a surface phenomenon at a rate less than the speed of sound. Deflagration is characteristic of low explosives such as black gunpowder.

Please refer to 40 CFR 122.22 (b) and 122.25 (enclosed) for guidance in applying for a permit or contact Mr. Greg Heber of my staff, at (312) 805-3719, for assistance if you have any questions.

Sincerely,

William H. Miner, Chief  
Technical, Permits, and Compliance Section

Enclosures

SHW:G. HEBER:ad 5/5/83 Disk #3

file with PA

RECORD OF COMMUNICATION		<input checked="" type="checkbox"/> PHONE CALL <input type="checkbox"/> DISCUSS <input type="checkbox"/> FIELD TRIP <input type="checkbox"/> CONFERENCE <input type="checkbox"/> OTHER (SPECIFY)	
(Record of item checked above)			
TO: Frank Grossman 312 / 984 / 1230	FROM: Greg Weber	DATE: 5/16/83	TIME: 1:30
SUBJECT: Part A of 4/19/83		Facility Name: Xplo or Vulcan?	
SUMMARY OF COMMUNICATION  265.1 (C)(5) P.472 264.1 (g)(1)  Name of Facility → Xplo-Tec or Vulcan?  <u>Xplo Tech</u>			
CONCLUSIONS, ACTION TAKEN OR REQUIRED  leave name as Xplo-Tec Inc. Change P.A. name from Vulcan to Xplo Tec			
INFORMATION COPIES TO:			

REGION V

5WMB

501

Weber

DATE:

4/25/83

RE:

Installation Name

Xplo Tech Inc.

Installation Address

Gold Rd &amp; 55th McCook IL

EPA ID#

1LD980683825

FROM:

Versar

TO:

Unit Chiefs

Attached for your review is a copy of

new Part A

for the above-referenced facility.

Cover letter date

Rec'd in Region

4/22/83

Rec'd in Versar

4/22/83

Action required

No permit allowed for openburning of flammable materials. Draft letter requesting more info.

out 5-3-83

Reviewer's summary:

denials. Is P.B. required

No entries in records. printout no P.A. 98700-12

No Interim Status. Applicant must receive finally effective permit prior to commencing operations.

Please note - the notification was submitted & entered in data base as Xplo-Tec. Please advise if name should be changed to Vulcan Materials Co. Thanks Martha

No notification in file.

G.W

Change to

leave as XploTec

PLEASE RETURN THIS FORM ALONG WITH ALL RELATED MATERIAL TO LISA BINDER



Please print or type in the unshaded areas only  
(fill-in areas are spaced for elite type, i.e., 12 characters/inch).

PA date received 4/25/83

Form Approved OMB No. 158-R0175

FORM 1 GENERAL		ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER F 1 LD 980683825	
LABEL ITEMS		I. EPA I.D. NUMBER		GENERAL INSTRUCTIONS	
III. FACILITY NAME		III. FACILITY NAME		If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
V. FACILITY MAILING ADDRESS		V. FACILITY MAILING ADDRESS			
VI. FACILITY LOCATION		VI. FACILITY LOCATION			
PLEASE PLACE LABEL IN THIS SPACE					
II. POLLUTANT CHARACTERISTICS					
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.					
SPECIFIC QUESTIONS		MARK 'X'		SPECIFIC QUESTIONS	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES NO FORM ATTACHED		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		YES NO FORM ATTACHED		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		YES NO FORM ATTACHED		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		YES NO FORM ATTACHED		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		YES NO FORM ATTACHED		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
III. NAME OF FACILITY					
1 SKIP VULCAN MATERIALS COMPANY XPLO-TEC INC. GW 5/16/83					
IV. FACILITY CONTACT					
A. NAME & TITLE (last, first, & title)					
2 MEYERS, David C. Safety Director 312 482 7000					
V. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
3 P.O. Box 6, 500 W. PLAINFIELD ROAD					
B. CITY OR TOWN					
4 COUNTRYSIDE IL 60525 WASTE MANAGEMENT BRANCH					
VI. FACILITY LOCATION					
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					
5 JOLIET ROAD & 55th, MC COOK, IL					
B. COUNTY NAME					
COOK WASTE MANAGEMENT BRANCH					
C. CITY OR TOWN					
6 MC COOK IL 60525					



VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
(specify)										(specify)									
7 7399 business services not elsewhere class										7 (specify)									
C. THIRD										D. FOURTH									
(specify)										(specify)									
7 (specify)										7 (specify)									

VIII. OPERATOR INFORMATION

A. NAME																																																		B. Is the name listed in Item VIII-A also the owner?									
8 XPLO-TEC, INC.																																																		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																																																		D. PHONE (area code & no.)									
F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE																																																		A 312 984 1230									
E. STREET OR P.O. BOX																																																											
P.O. Box 446																																																											
F. CITY OR TOWN																									G. STATE					H. ZIP CODE										IX. INDIAN LAND																			
B Prospect Heights																									IL					60070-0446										Is the facility located on Indian lands?																			
																																								<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																			

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)															D. PSD (Air Emissions from Proposed Sources)														
9 N															9 P														
B. UIC (Underground Injection of Fluids)															E. OTHER (specify)														
9 U															(specify)														
															IL-EPA(see attached copy of letter														
C. RCRA (Hazardous Wastes)															E. OTHER (specify)														
9 R															(specify)														


XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The removal from small quantity generators and the disposal of non-landfillable waste such as explosives, water reactive or highly flammable materials by burning or countercharging with known, high explosives. All work to be accomplished in a working quarry, where the the average level is 250-300 feet below street level.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.																																																	
A. NAME & OFFICIAL TITLE (type or print)																									B. SIGNATURE															C. DATE SIGNED									
Frank D. Grossman, Pres., Xplo-Tec, Inc.																																								19 Apr 83									

COMMENTS FOR OFFICIAL USE ONLY

C																																																	
C																																																	



Form Approved OMB No. 158-S80004

EPA Form 3510-3 (6-80)



III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE, INCLUDE DESIGN CAPACITY.

The removal from small quantity generators and the disposal of non-landfillablewaste such as explosives, water reactive or highly flammable materials by burning or detonating the materials with known high explosives. All work to be accomplished in a working quarry where the average level is 250-300' below street level.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER – Enter the four–digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four–digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY – For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non–listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE – For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS . . . . .	P	KILOGRAMS . . . . .	K
TONS . . . . .	T	METRIC TONS . . . . .	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.  
For non–listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non–listed hazardous wastes that possess that characteristic or toxic contaminant.  
Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER – Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non–listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. ZZ	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES							
				1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))			
X-1	K 0 5 4	900	P	T	0	3	D 8 0				
X-2	D 0 0 2	400	P	T	0	3	D 8 0				
X-3	D 0 0 1	100	P	T	0	3	D 8 0				
X-4	D 0 0 2									included with above	



EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY									
S W										S W									
T/A C 1										T/A C 2 D U P									
1 2 - 13 14 15										1 2 - 13 14 15 23 - 26									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																			
W N O J Z		A. EPA HAZARD WASTE NO. (enter code)		B. ESTIMATED ANNUAL QUANTITY OF WASTE		C. UNIT OF MEA- SURE (enter code)		D. PROCESSES											
								1. PROCESS CODES (enter)						2. PROCESS DESCRIPTION (if a code is not entered in D(1))					
		23 - 26 27 - 35				36		27 - 29 27 - 29 27 - 29											
1		D 0 0 3		Six (6)		M								detonation of explosives					
2																			
3																			
4																			
5																			
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		23 - 26 27 - 35				36		27 - 29 27 - 29 27 - 29											



IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)														
S													T/A	C
F														6
1	2											13	14	15

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)										LONGITUDE (degrees, minutes, & seconds)									
		8	7			5	2							4	7			3	0
		65	66			67	68			69	-		71		72	-		74	75

VIII. FACILITY OWNER

- ☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.
- B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER															2. PHONE NO. (area code & no.)									
		E														3	1	2						
		15	16													55	56	-	58					
3. STREET OR P.O. BOX										4. CITY OR TOWN					5. ST.		6. ZIP CODE							
		F																						
		15	16													40	41	42						
P.O. Box 6, 500 W Plainfield Rd.										G Countryside					I L		6 0 5 2 5							

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

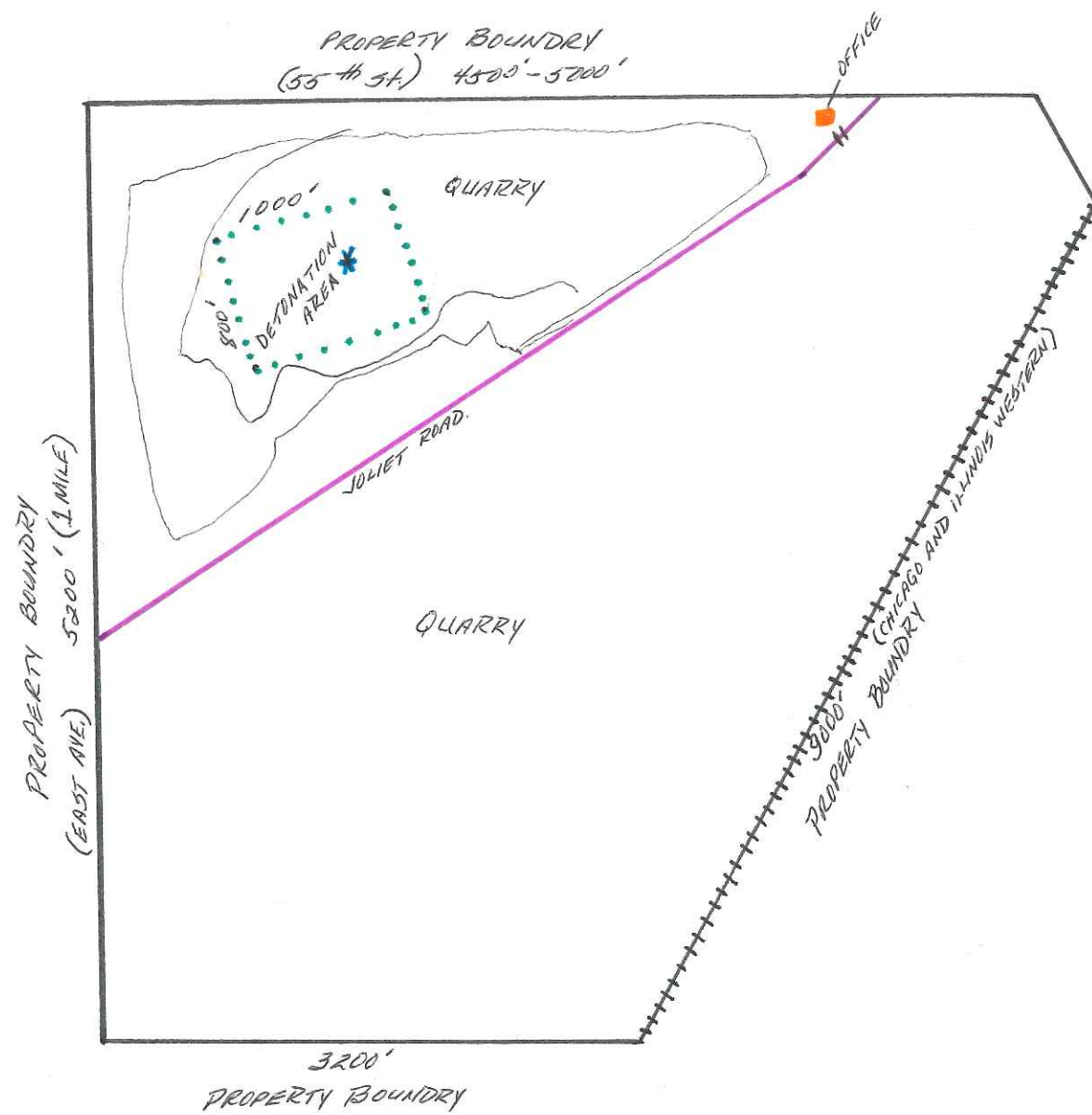
A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
David C. Meyers	David C. Meyers	4-15-83

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Frank D. Grossman, Pres. Xplo-Tec, Inc.	Frank D. Grossman Xplo-Tec, Inc.	19 Apr 83

## V. FACILITY DRAWING (see page 4)

McCook

\* NOTE - DETONATION AREA IS APPROX. 350' BELOW STREET LEVEL

RECEIVED  
APR 21 1983

WASTE MANAGEMENT  
BRANCH



McCOOK



Scale = Each Square 100' X 100'

# VULCAN MATERIALS COMPANY

## BLASTING REPORT

Date\_\_\_\_\_Location\_\_\_\_\_Sup't\_\_\_\_\_Shot No.\_\_\_\_\_

Time Fired\_\_\_\_\_M.No.of Holes\_\_\_\_\_Hole Dia.\_\_\_\_\_Stone Wt.Per Cu.Ft.\_\_\_\_\_

Depth of Holes\_\_\_\_\_Ht.of Face\_\_\_\_\_Spacing (ft.)\_\_\_\_\_Burden\_\_\_\_\_Wet\_\_\_\_\_Dry\_\_\_\_\_

No.of Decks\_\_\_\_\_Stemming(ft.)\_\_\_\_\_Manufacturer\_\_\_\_\_Strength\_\_\_\_\_

Total Lbs. Explosives\_\_\_\_\_Max.Explosive/Delay\_\_\_\_\_No.Delays/Hole\_\_\_\_\_

Wind Dir.\_\_\_\_\_Weather Cond.\_\_\_\_\_Coordinate Loc.\_\_\_\_\_

### EXPLOSIVES

GRADE	SIZE	EXPLOSIVES COST CWT.	POUNDS	COST
TL - 201	#50 Bags			
Tromax - 75	5½ x 33 1/3			
TL - 202	5½ x 25			
Primamite	3 x 8			
Primamite	2 x 8			

### CAP AND BLASTING COST INFORMATION

Make of Cap\_\_\_\_\_Total No. Used\_\_\_\_\_Cap Length Used\_\_\_\_\_

Delays Used\_\_\_\_\_Cost\_\_\_\_\_

Make of Primacord\_\_\_\_\_Amt. Used(ft.)\_\_\_\_\_Cost\_\_\_\_\_

Total Cost of Blast (Including Powder,Caps & Primacord)\_\_\_\_\_

Total Tons Rock in Blast\_\_\_\_\_Explosive Factor\_\_\_\_\_Tons Per Lb.\_\_\_\_\_

Explosive Cost/Ton of Rock\_\_\_\_\_Type of Cap Ignition-Timer\_\_\_\_\_

Shot Loaded\_\_\_\_\_Report Prepared By\_\_\_\_\_

APPROVED BY\_\_\_\_\_



XPLO-TEC, INC.

*Hazardous Materials Removal*

P.O. BOX 446  
PROSPECT HEIGHTS, ILLINOIS 60070-0446  
TELEPHONE (312) 984-1230

8 Apr 83

U.S. Environmental Protection Agency  
230 S. Dearborn St.  
Chicago, Il 60604

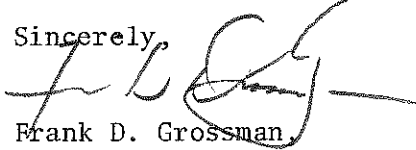
Dear Sir,

The following is submitted in furtherance of the position that the Vulcan facility, McCook, Il was utilized as a disposal area for certain types of non-landfillable waste prior to November 1980. That the operators of Xplo-Tec, Inc, as police bomb technicians had utilized the facility from the mid-seventies to dispose of class A & B explosives and certain chemicals such as picric acid and diethyl ether received from small quantity generators such as schools and hospitals. The following is a partial list of the dates and report numbers that some of these jobs were handled under:

15 Aug 80	#949566
27 Jun 80	#936562
16 Jun 80	#934489
18 Apr 80	#915681
11 Apr 80	#915100
10 Dec 79	#889466
16 Nov 79	#885193
18 Oct 79	#878531
24 Sep 79	#872850

Respectfully submitted for your consideration.

Sincerely,

  
Frank D. Grossman,  
Pres., Xplo-Tec, Inc.

RECEIVED  
APR 11 1983

WASTE MANAGEMENT  
BRANCH

XPLO-TEC, INC.

Hazardous Materials Removal

P.O. BOX 446  
PROSPECT HEIGHTS, ILLINOIS 60070-0446  
TELEPHONE (312) 984-1230

7 Sep 83

IL0980683825 TSD, PA

Mr. Karl Klepitsch Jr.  
Chief, Waste Management Branch  
5-HW  
U.S. EPA  
130 S. Dearborn St.  
Chicago, IL 60604

Dear Mr. Klepitsch,

Mr. Stone of your agency suggested that we write to you for an opinion concerning Xplo-Tec, Inc. (Xplo) possible exemption from the Federal EPA's permit for the disposal of hazardous (explosive/reactive) waste. Xplo services small quantity generators, particularly schools and hospitals who by their operation generate well below the 2200 pound limit.

Our past activity was generally concerned with the disposal of ethers that have formed explosive peroxides, picric acid, sodium metal and the like. These disposals have never exceeded 30 to 40 pounds per month from any one generator during the past year. We believe the material we intend to treat would meet the EPA's definition of reactive material; i.e. explosives and air/water reactives. It is our understanding that a permit would then not be required, and therefore ask that affirmation be forwarded to us.

Sincerely,

Irv Kraut,  
VP

RECEIVED  
9/09/83

RECEIVED  
SEP 03 1983  
WASTE MANAGEMENT  
BRANCH





ENVIRONMENTAL PROTECTION AGENCY

REGION V

230 SOUTH DEARBORN ST.  
CHICAGO, ILLINOIS 60604

(17)

REPLY TO ATTENTION OF:

RCRA ACTIVITIES

OCT 11 1983

out M. L.

INV. KRAUT, Vice President

Xpio - Tec Incorporated

P.O. Box 446

Prospect Heights, Ill.

60070-0446

RE: Withdrawal of Part A (Protective Filing)

FACILITY NAME: XPIO - Tec, Incorporated

USEPA ID NO.: ILD 980 683 825

Dear Mr. Kraut:

This is to acknowledge that the United States Environmental Protection Agency (USEPA) has completed its review of your Part A Hazardous Waste Permit Application and your letter of September 7, 1983, requesting the withdrawal of your permit application. According to the information which you have submitted, your facility has not, since November 19, 1980, treated, stored, or disposed of hazardous waste, and this permit application was a protective filing. It is the opinion of this office, based on the information submitted, that your facility is not required to have a hazardous waste permit under Section 3005 of the Resource Conservation and Recovery Act at this time. Please be advised that you must still comply with all applicable State and local requirements.

You will retain your USEPA Identification number if you notified as a generator or transporter of a hazardous waste.

Please contact the Technical, Permits and Compliance Section at (312) 353-2197 for assistance if you have any questions. Please refer to "Withdrawal of Part A (Protective Filing)," in all telephone contacts and correspondence on this matter.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief  
Waste Management BranchSame  
add. AS  
above

cc. FRANK D. CROSSMAN, President

cc. DAVID C. Meyers, Safety Director

XPIO - Tec, Incorporated

P.O. Box 6, 500 W. Plainfield Road

Country Side, Ill. 60525

cc. IEPA

OK  
DH  
9/25/83



UNITED STATES  
ENVIRONMENTAL PROTECTION AGENCY  
REGION V  
230 SOUTH DEARBORN ST.  
CHICAGO, ILLINOIS 60604

OCT 11 1983

REPLY TO ATTENTION OF:

5HW-13

Irv Kraut, Vice President  
Xplo-Tec Incorporated  
P. O. Box 446  
Prospect Heights, Illinois 60070-0446

RE: Withdrawal of Part A (Protective Filing)  
FACILITY NAME: Xplo-Tec Incorporated  
USEPA ID NO.: ILD 980 683 825

Dear Mr. Kraut:

This is to acknowledge that the United States Environmental Protection Agency (USEPA) has completed its review of your Part A Hazardous Waste Permit Application and your letter of September 7, 1983, requesting the withdrawal of your permit application. According to the information which you have submitted, your facility has not, since November 19, 1980, treated, stored, or disposed of hazardous waste, and this permit application was a protective filing. It is the opinion of this office, based on the information submitted, that your facility is not required to have a hazardous waste permit under Section 3005 of the Resource Conservation and Recovery Act at this time. Please be advised that you must still comply with all applicable State and local requirements.

You will retain your USEPA Identification number if you notified as a generator or transporter of a hazardous waste.

Please contact the Technical, Permits and Compliance Section at (312) 353-2197 for assistance if you have any questions. Please refer to "Withdrawal of Part A (Protective Filing)," in all telephone contacts and correspondence on this matter.

Sincerely yours,

A handwritten signature in cursive script, reading "Karl J. Klepitsch Jr."

Karl J. Klepitsch, Jr., Chief  
Waste Management Branch

cc: Frank D. Grossman, President  
David C. Meyers, Safety Director  
IEPA

*File*



XPLO-TEC, INC.

*Hazardous Materials Removal*

P.O. BOX 446  
PROSPECT HEIGHTS, ILLINOIS 60070-0446  
TELEPHONE (312) 984-1230

30 May 84

U.S. EPA  
RCRA Activities  
Region V  
P.O. Box A3587  
Chicago, IL 60690


Dear Sir,

A change in our operational activity necessitates a reactivation of  
our Generator Number #ILD 980683825. Kindly take the necessary action  
to effect that change for us.

PA-N, NOT-7

Status changed to  
generator.  
6-4-84 sjh

Sincerely,

  
Frank Grossman, Pres.  
Xplo-Tec, Inc.

RECEIVED

JUN 01 1984

WM  
EPA, REGION V

## RESPONDENT CONTACT RECORD (RCR)

Facility ID Number		Company Name	
I7D9806838251		Xpco-Tec, Inc	
Company Address		City	
P.O. Box 446		Prospect Heights	
Contact Person's Name/Title		State	
Mr. Knaut		TX	
Telephone Number (including area code)		Zip Code	
312-784-1230		60674	
CONTACT RECORD			

[illegible]







I.D. - FOR OFFICIAL USE ONLY														
S												T/A	C	
W												1		
1	2										12	13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

D N A	1	2	3	4	5	6
	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
	7	8	9	10	11	12
	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K025					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
P009	P077	P071	P047	P034	P048
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
P068	P112	P081	P048	P047	P020
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
P009	P081	U105	U169	U185	U234
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE  
(D001)

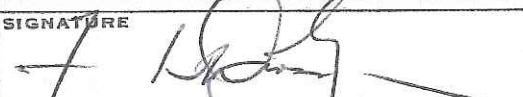
☐ 2. CORROSIVE  
(D002)

☒ 3. REACTIVE  
(D003)

☐ 4. TOXIC  
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE	NAME & OFFICIAL TITLE (type or print)	DATE SIGNED
	Frank D. Grossman, Pres. XPLO-TEC, INC	3/30/83



U.S. ENVIRONMENTAL PROTECTION AGENCY		NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	
INSTALLATION'S EPA I.D. NO.	not on PO		
I. NAME OF INSTALLATION	PLEASE PLACE LABEL IN THIS SPACE		
II. INSTALLATION MAILING ADDRESS	COPY		
III. LOCATION OF INSTALLATION	PART A WITHDRAWAL APPROVED - TSD DELETED 06 MAY 1983		
FOR OFFICIAL USE ONLY			
COMMENTS			
INSTALLATION'S EPA I.D. NUMBER			
APPROVED			
DATE RECEIVED (yr., mo., & day)			
I. NAME OF INSTALLATION			
II. INSTALLATION MAILING ADDRESS			
STREET OR P.O. BOX			
CITY OR TOWN			
ST. ZIP CODE			
III. LOCATION OF INSTALLATION			
STREET OR ROUTE NUMBER			
CITY OR TOWN			
ST. ZIP CODE			
IV. INSTALLATION CONTACT			
NAME AND TITLE (last, first, & job title)			
PHONE NO. (area code & no.)			
V. OWNERSHIP			
A. NAME OF INSTALLATION'S LEGAL OWNER			
B. TYPE OF OWNERSHIP (enter the appropriate letter into box)			
VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))			
VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))			
VIII. FIRST OR SUBSEQUENT NOTIFICATION			
IX. DESCRIPTION OF HAZARDOUS WASTES			

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).



I.D. - FOR OFFICIAL USE ON									
2									
W									

DESCRIPTION OF  
C. COMPANY  
B 109  
B 108  
B 107  
B 106  
B 105  
B 104  
B 103  
B 102  
B 101

X. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

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13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

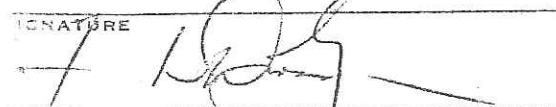
49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

<input checked="" type="checkbox"/> 1. IGNITABLE (D001)	<input type="checkbox"/> 2. CORROSIVE (D002)	<input checked="" type="checkbox"/> 3. REACTIVE (D003)	<input type="checkbox"/> 4. TOXIC (D009)
---	--	--	--

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) Frank D. Grossman, Pres. XPLO-TEC, INC	DATE SIGNED 3/30/82
---	---	------------------------

ATTACHMENT



IX. DESCRIPTION OF HAZARDOUS WASTES

c. Commercial Chemical Product Hazardous Wastes CONTINUED:

~~U 105~~  
U 106  
U 163  
U 121  
~~U 169~~  
U 170  
U 171  
U 172  
U 173  
U 174  
U 111  
U 176  
U 177  
U 178  
U 179  
U 180  
U 181  
~~U 185~~

06 MAY 1983

7   
XPL-TEC, INC.

481

RECORD OF COMMUNICATION		<input checked="" type="checkbox"/> PHONE CALL <input type="checkbox"/> DISCUSSION <input type="checkbox"/> FIELD TRIP <input type="checkbox"/> CONFERENCE <input type="checkbox"/> OTHER (SPECIFY)	
(Record of item checked above)			
TO: Frank Grossman	FROM: Greg Weber	DATE: 4-11-83	TIME: 10:15
SUBJECT: 4700-12      XPLO-TEC, Inc., P.O. Box 446 Prospect Heights, IL 60070			
SUMMARY OF COMMUNICATION 150? PA? will return call ↳ treat waste explosives (proposal). Part A is being prepared and will shortly be submitted → then Part B.			
CONCLUSIONS, ACTION TAKEN OR REQUIRED file in notification file			
INFORMATION COPIES TO:			



REGION V

481 Weber

DATE: 4/01/83

5WMB

RE: Installation Name 8020-TEC 5mInstallation Address Joliet Road & 55th - McCook, IL

EPA ID# \_\_\_\_\_

FROM: Versar

TO: Unit Chiefs

Attached for your review is a copy of Letter 8700-12 (TSD)

for the above-referenced facility.

Cover letter date \_\_\_\_\_

Rec'd in Region 4/01/83Rec'd in Versar 4/01/83Action required Issue I.D. # as TSD. & File.GW 4-11-83Reviewer's summary: contact applicant - Part A is beingprepared. see phone memo



ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

•ILD980683825

XPLO-TEC INC

PO BOX 446

PROSPECT HEIGHTS

IL 60070

INSTALLATION ADDRESS

JOLIET RD & 55TH

MCCOOK

IL 60625

1157